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04-40126-US

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of Information unless it displays a valid OMB control number **Application Number** 10/811,238 **REVOCATION OF POWER OF** Filing Date 03/26/2004 **ATTORNEY WITH** First Named Inventor Moffa el el. **NEW POWER OF ATTORNEY Art Unit** 3671 AND Examiner Name Tara L. Mayo **CHANGE OF CORRESPONDENCE ADDRESS**

Attorney Docket Number

I hereby revoke all previous powers of attorney given in the above-identified application.					
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Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)					
	icant or Assignee of Record				
Signature Conditional More and the					
Name Richard Howard Tuft					
Date 10/24/07	Telephone 600/541-0170				
NOTE: Signatures of all the inventors or assignees of record of the entire inte signature is required, see below.	terest or their representative(s) are required. Submit multiple forms if more than or	ю			
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STATEMENT UNDER 37 CFR 3.73(b)				
Applicant/Patent Owner: Moffa et al.				
Application No./Patent No./Control No.: 10/811,238 Filed/Issue Date: 03/26/2004				
Entitled: Stretcher Supporter for a Storable Patient Lift and Transfer Device and Method for Doing the Same	ė			
Millennium Medical Products, inc. , a corporation				
(Name of Assignee) (Type of Assignee: corporation, partnership, university, states that it is:	government agency, etc.)			
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an assignee of less than the entire right, title and interest (The extent (by percentage) of its ownership interest is%)				
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The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.	07			
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